File Original and First Copy with Department of Ecology Second Copy—Owner's Copy Third Copy—Driller's Copy

## WATER WELL REPORT

STATE OF WASHINGTON

Water Right Permit No.

Terr Cere 140	/		
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- 55	/IF.	ノろうせ	1
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(1)	OWNER: Name MARUIN EPPES	Address P.O. BLAKENAI ALASKA	9611
(2)	LOCATION OF WELL: County /SLAND	. NW & NE & Sec. 33 T33 N. A.	LE w.m.
(2a)	STREET ADDDRESS OF WELL (or nearest address) Clover VA	olley - Crusby Rd	
(3)	PROPOSED USE: Domestic Industrial [] Municipal []   Irrigation DeWater   Test Well   Other	(10) WELL LOG or ABANDONMENT PROCEDURE DESC Formation: Describe by color, character, size of material and structure	, and show
(4)	TYPE OF WORK: Owner's number of well	thickness of aquifers and the kind and nature of the material in each stratum with at least one entry for each change of information.	<del></del>
(-,	Abandoned \( \begin{array}{cccccc} New well & Method: Dup  Bored \( \begin{array}{ccccc} Driven \\ \begin{array}{ccccccccc} Driven \\ \begin{array}{cccccccccccccccccccccccccccccccccccc	HARO PAN O	55
<del></del>	DIMENSIONS: Diameter of wellinches.	CIAY 78	119
(5)	Drilled 134 feet. Depth of completed well 134 ft.	WATER GRAVEL 119 CIAY 134	134
•	CONSTRUCTION DETAILS:  Casing installed:  Diam. from Unit to 129 tt.  Welded University installed  Diam. from Unit to 159 tt.		
	Perforations: Yes No		
	SIZE of perforations		
	Screens: Yes No Cook		
	Type STATALESS Model No.  Diam Slot size 25 from /27 ft. to /3 / ft.		
	Diam. Slot size from ft. to ft. to ft. to Size of gravel	ISLAND COUNTY-WELL SITE	
	Gravel placed from ft. to ft.	APPROVE	<i>P.</i>
	Surface seal: Yes No To what depth? 184 tt.  Material used in seal BFNT3 175		
	Did any strata contain unusable water? Yes No. No. Depth of strate		
(7)	PUMP: Menufacturer's Name	RECEIVED	
	Type HP	AUG 1 9 1901	
(8)	Static level	DEPT OF ECOLOGY	
	Artesian water is controlled by(Cap, valve, etc.))	Work started 4.5	
(9)	WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? Yes No life yes, by whom?	WELL CONSTRUCTOR CERTIFICATION:	
	Yield:gal./min. withft. drawdown afterhre.	I constructed and/or accept responsibility for construction of	STANGATOS.
-	Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level) Time Water Level Time Water Level Time Water Level	knowledge and belief.	67512
_		Address Address	OR PRINT) 98277
	Date of fest	(Signed License No. Contractor's	19
	Arrest gal. / min. with stem set at ft. for hra  Arrestan flow g.p.m. Date		_, 19 <b>J</b> /
	Temperature of water Was a chemical analysis made? Yes No	(USE ADDITIONAL SHEETS IF NECESSARY)	63

1360)279-2513

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## Well Tagging Form



Uniq

ue Well	Tag No:	P	11		3	7]	
			,			,	
THE PARTY OF THE PARTY	The Mark Street or Williams	San Personal Property lies	SEATED SE	ACTIVITY OF	1000	Service System	

		ion ches		
Well Report available (please att	ach this form to the v	vell report and submit	it to the Ecology Regional C	office near
Verification inconclusive	•		53692	<del>}</del>
Well Report not available		•		
E WEGEOWN ESSUIE	EOF:			GPT-
First Name: Vi ew Water	Sr Si	Name.		
Street Address: 16 Jack Pryor,	custodian	2750	Dixie Lane	
City: Clock Harbor	Sta	te: (V / ) 9	18277	
ALECATION OF WHILE	<b>IEDIFE</b>	ENTERE	<b>NVELE REE</b>	DRIN
Well Address: 2750 Dixie	Lane.	Parcel RI	3333-494-5	2450
city: Oak Harbor	Cou	nty: $\frac{1}{2}$	nd	
т <u>33</u> н. к	W.M. Sec	33	<u> </u>	W
EOR	AGENAY	ire en la		
Latitude		<del></del>	GPS Topographic Map	•
Langitude			Survey	
			Computer generated	
Eievation at land surface	feet/meters (circ	(е опе)	Digital Altimeter	
			Topographic Map	
Additional information, if available:			Other	<del></del>
Location marked on topographic map (	(please attach)			 ,
Location marked on air photo (please a	attach)			

			FOR AGENCY USE ONLY	
			WEEKCHEROUGHAND A	香.
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ion of We	ll identific:	gaT notte	trapped to well casing	
				-
supplen	nental ta	g neede	d for ease of identifying well? Yes No	
where w	ras tag þi	aced7		···
CV	В	A	Scale 1:24,000 (1"=2,000")	
	<u> </u>		Indicate the location of the well within the Section by drawing a dct at that poi	nt
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FOIR	<b>E66</b>	Bole	EY WATER RESOURCES PROGRAMONLY	
ight#	•		Date Issued	
า. วกe:	Applicat	ion	Permit Certificate Claim Exempt	